

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>J</i>		
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>AL</i>	535	07-27-01
RESPONSE FORMALITY REVIEW			

82501

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	08/15/08
2	✓	✓	08/15/08
3	✓	✓	08/15/08
4	✓	✓	08/15/08
5	✓	✓	08/15/08
6	✓	✓	08/15/08
7	✓	✓	08/15/08
8	✓	✓	08/15/08
9	✓	✓	08/15/08
10	✓	✓	08/15/08
11	✓	✓	08/15/08
12	✓	✓	08/15/08
13	✓	✓	08/15/08
14	✓	✓	08/15/08
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

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